



**IDAHO MEDICAID PHARMACY
DEPARTMENT**

1-208-364-1829

**MAGELLAN MEDICAID ADMINISTRATION
PHARMACY SUPPORT CENTER**

1-800-922-3987

24 hours/day/7 days per week

- ❖ Claims processing assistance
- ❖ Drug coverage and payment information
- ❖ Eligibility
- ❖ Plan limitations
- ❖ Coordination of benefits
- ❖ Prior authorization status

**IDAHO MEDICAID
PHARMACY CALL CENTER**

1-866-827-9967

1-208-364-1829

8:00 a.m. – 5:00 p.m. MT

Monday – Friday

Closed federal and state holidays

- ❖ Initiate prior authorizations

PRIOR AUTHORIZATION FAX

1-800-327-5541

WEBSITES

www.medicaidpharmacy.idaho.gov

- ❖ Preferred Drug List
- ❖ PA forms
- ❖ P & T information

<https://Idaho.fhsc.com>

DUR BOARD MEETINGS

- ❖ January 20, 2011
- ❖ April 14, 2011
- ❖ July 21, 2011
- ❖ October 20, 2011

P&T COMMITTEE MEETINGS

- ❖ April 15, 2011
- ❖ May 20, 2011
- ❖ October 21, 2011
- ❖ November 18, 2011

RETROSPECTIVE DRUG UTILIZATION REVIEW (RETRODUR) OF SUBOXONE AND SUBUTEX USAGE

In September 2010, electronic profiles were reviewed for all Idaho Medicaid participants who had received at least one prescription for Suboxone or Subutex in the previous six months. Letters were sent to prescribers for patients who had claims for Suboxone/Subutex AND a benzodiazepine or opioid during the same time period. One hundred and twenty-four patients were identified and five hundred and sixty-seven letters were sent (patients were commonly receiving medications from multiple prescribers). An Idaho Medicaid pharmacist also looked at the electronic diagnoses that had been billed during that same time period. If there was no diagnosis of opioid dependency or opioid abuse, the pharmacist called the prescriber to confirm the diagnosis associated with the Suboxone/Subutex prescription. In the vast majority of patients, a diagnosis of opioid dependency was confirmed. As a result of this study, an edit was added to the point-of-sale system for Suboxone/Subutex requiring prior authorization if a diagnosis of opioid abuse or opioid dependency was NOT in the patient's electronic profile within the previous two years. This edit went into effect on 01/3/2011. As an additional follow-up to this study, an informational letter was sent to the pharmacies that had dispensed Suboxone/Subutex in the previous six months.

If an Idaho Medicaid participant has a diagnosis in his/her electronic profile for opioid abuse or opioid dependency, the claim will continue to pay electronically at the pharmacy without prior authorization needed as long as it is within quantity limits (up to three tablets daily for any strength of Suboxone/Subutex) and within age limits (age 16 years and higher).

Prior authorization will now be necessary for patients who do not have an opioid abuse or opioid dependency diagnosis in their electronic profile. In the review of six months of data, Idaho Medicaid found that approximately 40 percent of patients did NOT have an opioid abuse or opioid dependency diagnosis listed in their electronic profile.

In order for a prescriber to legally prescribe Suboxone or Subutex for opioid dependency, he/she must be certified and have a DEA-X number; this number should be included on the prescription for Suboxone/Subutex. It is the pharmacist's responsibility to verify that the prescriber does have this number. Information can be found at the website <http://buprenorphine.samhsa.gov/index.html> and inquiries can be sent via e-mail to info@buprenorphine.samhsa.gov to verify if a prescriber does have this certification. If using the above e-mail address, please include the prescriber's name, NPI, and regular DEA number. The telephone number for the Substance Abuse and Mental Health Services Administration (SAMHSA) is 866-287-2728; their fax number is 240-276-1630. Please be aware that listing on this website is voluntary. Therefore, just because a physician is not listed does not mean that the physician is not certified to prescribe Suboxone/Subutex.

Concurrent opioid therapy is contra-indicated for patients receiving Suboxone/Subutex. Approximately 20 percent of the Suboxone/Subutex patients in the six months duration of this drug utilization review (DUR) had at least one opioid prescription filled at the same pharmacy within the same days of service as the Suboxone/Subutex. Another 20 percent of the Suboxone/Subutex patients had an opioid prescription filled at a different pharmacy within the same days of service as the Suboxone/Subutex. The pharmacist plays a crucial role in managing patients with opioid abuse and opioid dependency. Idaho Medicaid participants currently receiving Suboxone/Subutex will not be authorized for payment of opioids.

LOCK-IN OVERVIEW

The Idaho Medicaid Lock-In program is designed to control inappropriate utilization of health care resources. The Lock-In Program restricts the participant to a designated primary care provider who coordinates all necessary medical usage and to one pharmacy to fill all medications. Upon referral, the following are analyzed:

- Medication profile for the potential over use of target medications
 - ◆ ≥ 6 Benzodiazepines claims in last 60 days
 - ◆ ≥ 8 opiate claims within last 60 days
 - ◆ ≥ 3 Tramadol claims or 480 tablets within last 60 days
 - ◆ Continuous use of skeletal muscle relaxants for > than 6 months
- Multiple providers
- Multiple pharmacies
- Excessive emergency room use
- Screening of health conditions for a history of drug dependence or abuse

For lock-In referrals, please contact the Idaho Medicaid Pharmacy department at 1-208-364-1829.

CMS COVERAGE CHANGES FOR COMPOUNDING INGREDIENTS

Effective January 1, 2011, Idaho Medicaid will no longer reimburse for bulk powders and several other ingredients commonly used in pharmaceutical compounding. This is due to a recent change by the Center for Medicare & Medicaid Services (CMS). CMS has removed active pharmaceutical ingredients (APIs) and excipients from the list of CMS covered outpatient drugs. An API is defined as a bulk drug substance that, when used in the manufacturing, processing, or packaging of a drug, becomes an active ingredient or a finished dosage form of a drug. Excipient products include many compounding bases such as aquaphor or petrolatum. CMS has determined that APIs do not meet the definition of covered outpatient drugs and excipients are non-drug products. The CMS memo is available at www.cms.gov/MedicaidDrugRebateProgram/02_StateReleases.asp (select *Downloads for Calendar Year 2010*, then release 155).

The list of newly excluded APIs and excipients is extensive and on-going revisions to the list are expected. The list is currently on the Idaho Medicaid Website at www.medicaidpharmacy.idaho.gov and on the CMS Website at www.cms.gov/reimbursement/02_Spotlight.asp. Select the zipped file under Downloads named *API and Excipient NDCs Identified*, which contains two listings, one for APIs and one for excipients.

Providers who frequently compound prescriptions for Medicaid recipients should review the CMS list. Claims for some compounded prescriptions that have been paid in the past will reject effective January 1, 2011.

For questions, please contact the pharmacy unit supervisor in the Division of Medicaid at 1-208-364-1829.